

Underwritten by: Bristol West Casualty Insurance Company

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Rates Effective 03/04/2021

Quote provided for: RENAE HARRISON Quote Date: 07/29/2021 Producer: Schmitz,Andrew

 922 AMERICA AVE NW
 Quote Time:
 4:00 PM ET
 1434 YANKEE DOODLE RD

 BEMIDJI, MN 56601-2863
 Proposed Effective Date:
 08/06/2021
 EAGAN, MN 55121-1801

651-456-8834

COVERAGES

Liability Bodily Injury/Property Damage 100/300/100
Personal Injury Protection 20/0-20/0
UM/UIM 100/300

Note: Coverage provided only if premiums are not zero

VFH	CLE	INFORM	MOITAN	

VEHICLE ACV Gar Zip COMP GLS COLL ΤI RT AOE AT VTI USE LI1 LI2 LI3 PH1 PH2 YMM 2002 CHEVROLET TRAILBLAZER 56601 No None None None None N/A 03 07 11 09 CT3 None 2007 GMC ENVOY 56601 N/A Р 03 10 None Nο None None None None Ν 11 07 17 GF2

DRIVER INFORMATION NAME **REL** AGE **RATED** MS MATURE DRIVER **DISTANT STUDENT** RENAE HARRISON Insured Rated No 30 S Nο DOLICY TEDM

ER: 0CW			POLICY TERM:
PREMIUM INFORMATION			
COVERAGES	AUTO #1	AUTO #2	
dily Injury	\$107.00	\$110.00	
perty Damage	\$82.00	\$89.00	
onal Injury Protection	\$76.00	\$87.00	
/UIM	\$21.00	\$24.00	
prehensive	\$0.00	\$0.00	
sion	\$0.00	\$0.00	
al	\$0.00	\$0.00	
ng and Labor	\$0.00	\$0.00	
itional Equipment	\$0.00	\$0.00	
hicle Total	\$286.00	\$310.00	

PREMIUM GRAND TOTAL

Vehicle Subtotal (all vehicles) \$596.00

Grand Total \$596.00 Semi-Annually

RATI	NG	/DIS	COUN	IT INF	ORMA	TION:

MULTI CAR: RESIDENCY INSURANCE GO PAPERLESS: Yes Yes Yes ADVANCED QUOTE: PAID IN FULL: Yes STANDARD CARRIER: Yes Yes **DISTANT STUDENT:** MULTI-POLICY: EFT: Yes No Yes MATURE DRIVER: HIGH DOWNPAY: YEARS CLEAN: No 5 Years No **REJECT WAGE LOSS** No PRIOR LIMITS: MN DYNAMITE DEDUCTIBLE PROGRAM: No ANTI-THEFT: No FULL PERMISSIVE USER COVERAGE: PAY PLAN SURCHARGE: No

DIRECT BILLING OPTIONS: Includes a \$8.00 service charge per installment.

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Pay Plan	Down Payment	Number of Installments	Amount per Installment			
6 Pay (EFT Only) - 16.7% down, 5 @ 16.66%	\$116.40	5	\$124.12			
6 Pay - 24% down, 5 @ 15.2%	\$167.28	5	\$113.94			
3 Pay (Day 43) - 40% down, 2 @ 30%	\$278.80	2	\$217.10			
*Paid-In-Full	\$596.00	0	\$0.00			

An asterisk (*) indicates the selected pay plan

THIS QUOTE IS BASED ON THE INFORMATION PROVIDED BY THE APPLICANT AND IS SUBJECT TO FINAL UNDERWRITING

You will save on your policy premium if you choose to Pay In Full or choose a pay plan with a high down payment. You can also save if you choose to have your payments withdrawn via EFT (Electronic Funds Transfer).

Note: This policy contains an Advanced Quote Discount. However, your policy effective date must be within 7 to 59 days in advance of the original quote date of 07/29/2021 or the discount will be removed.

Please review the information you have provided for accuracy; incomplete and inaccurate information could affect your rate. This quote reflects premium that has not been verified through any vehicle and driver history reports.